



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR QUALITY**

**Request for Determination of Changes of Minor Significance
and Exemption from Plan Approval/Operating Permit
Under Pa Code §127.14 or §127.449**

A. Request for:	
<p>Exemption from Plan Approval</p> <p><input type="checkbox"/> Additional physical changes of minor significance that add new equipment, pursuant to 25 Pa. Code Section 127.14(c)(2)</p> <p><input type="checkbox"/> Additional physical changes of minor significance that do not add new equipment, pursuant to 25 Pa. Code Section 127.14(c)(1)</p> <p><input type="checkbox"/> Minor Sources or classes of sources, pursuant to 25 Pa. Code Section 127.14(a)(1)-(7)</p> <p><input type="checkbox"/> Other sources and classes of sources of minor significance, pursuant to 25 Pa. Code Section 127.14(a)(8)</p> <p><input checked="" type="checkbox"/> Physical changes to sources of minor significance, pursuant to 25 Pa. Code Section 127.14(a)(9)</p>	<p>Exemption from Operating Permit</p> <p><input type="checkbox"/> Other sources and classes of sources of minor significance, pursuant to 25 Pa. Code Section 127.14(a)(8)</p> <p><input type="checkbox"/> Changes due to De Minimis increases in emissions, pursuant to 25 Pa. Code Section 127.449</p> <p><input type="checkbox"/> Additional physical changes of minor significance that add new equipment, pursuant to 25 Pa. Code Section 127.14(c)(2)</p> <p><input type="checkbox"/> Additional physical changes of minor significance that do not add new equipment, pursuant to 25 Pa. Code Section 127.14(c)(1)</p> <p><input type="checkbox"/> Physical changes to sources of minor significance, pursuant to 25 Pa. Code Section 127.14(a)(9)</p>
B. Company/Facility Information	
Company/Facility Name: HERSHEY FOODS CORP, HER REESE CANDY CO	Plant Name: 2
Site Address: 101 e main st halifax PA 17077	
Mailing Address: 101 e main st halifax PA 17077	
Federal Employer Identification Number (EIN): 23-0691590	
Current Operating Permit No:	NAICS Code:
Name of Person Completing Form: janet gers	Title:
Address	Telephone: (717) 772-9713
101 e. main st.	Fax:
enola PA 17044	Email: c-jnasta@state.pa.us
Name of Company/Facility Contact Person: janet gers	Title:
Address	Telephone: (717) 772-9713
101 e. main st.	Fax:
enola PA 17044	Email: c-jnasta@state.pa.us
C. Project Description	
Project Type: <input type="checkbox"/> Other <input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Modification <input type="checkbox"/> Remediation	
Total number of sources in project: 1	
Description of project: new bean roaster	



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D. Source Description			
Source Name: P799-Bean Roster			
Source Category: FOOD AND AGRICULTURAL PRODUCTS (see 61) -- Roasting (except 70.005)			
Source Location: plant 5			
Source Type: <input checked="" type="checkbox"/> Stationary <input type="checkbox"/> Portable			
Is equipment existing or proposed? <input type="checkbox"/> Existing <input checked="" type="checkbox"/> Proposed			
Actual or Planned Date of Installation: 01/11/2007			
Municipality: Derry		County: Dauphin	
Source Description: Installation of a new bean roaster.			
Pollutant	Calculation Method	Emissions (lbs/hr)	Emissions (tons/year)
CO	SEE COMMENT	0.0000	0.0000
Hazardous Air Pollutants	SEE COMMENT	0.0000	0.0000
NOX	SEE COMMENT	100.0000	10.0000
PM10	SEE COMMENT	0.0000	0.0000
PM2.5	SEE COMMENT	0.0000	0.0000
Particulate	SEE COMMENT	0.0000	0.0000
SOX	SEE COMMENT	0.0000	0.0000
VOC	SEE COMMENT	0.0000	0.0000
Will the construction of this source increase emissions from other sources at this facility?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is the construction or modification of the source subject to 25 Pa. Code, Subchapter E, New Source Review (NSR) requirements or prevention of Significant Deterioration (PSD) of Air Quality regulations at Subchapter D?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			



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E. Exemption History				
Source Name	Date of Installation	Reason for Exemption		
		RFD	Exemption List	De Minimis

F. List of Attached Documents	
Description of Attachment	Confidential?

G. Signature of Responsible Official or Authorized Representative		
I, _____, certify under penalty of law as provided in 18 Pa. C.S.A. § 4904 and 35 P.S. § 4009(b)(2) that based on information and belief formed after reasonable inquiry, the statements and information contained in this form are true, accurate, and complete.		
Name	Date	Telephone
Address	Email Address	

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NOTES

There are no notes associated with this report.

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